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Patent Attorney Docket No. <u>033679-040</u>

MAR 3 1 2003

at c	IN THE UNITED STATES PATENT of	Γ AND TRADEMARK OFFICE						
In re Pate	nt Application of) BOX/NON-FEE RESPONSE						
Kenneth (G. NOGGLE	Group Art Unit: 3722						
Application	on No.: 09/782,915	Examiner: Dana Ross						
Filed: Fe	bruary 13, 2001	Confirmation No.: 3193						
	UTTING TOOL ADJUSTMENT EVICE	Confirmation No.: 3193 APR 1 2003 ANSMITTAL LETTER						
AMENDMENT/REPLY TRANSMITTAL LETTER								
	Commissioner for Patents on, D.C. 20231							
Sir:								
Encl	osed is a reply for the above-identified patent application.							
, []	A Petition for Extension of Time is also enclosed.							
[]	[] A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.							
[]	Also enclosed is/are							
[1/]	Second Information Disclosure Statement.							
. []	Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$375.00 (2801) [] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).							
	[] Applicant(s) previously submitted, on, for which continued examination is requested.							
[]	Applicant(s) request suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.							
[]	A Request for Entry and Consideration o (1809/2809) is also enclosed.	f Submission under 37 C.F.R. § 1.129(a)						
· [√]	No additional claim fee is required.							
[]	An additional claim fee is required, and i	s calculated as shown below:						

AMENDED CLAIMS							
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE		
Total Claims	20	MINUS 20 =		× \$18.00 (1202) =			
Independent Claims	4	MINUS 4 =		× \$84.00 (1201) =			
If Amendment adds m	ultiple depend	ent claims, add \$280	0.00 (1203)				
Total Amendment Fee							
If small entity status is claimed, subtract 50% of Total Amendment Fee							
TOTAL ADDITION	AL FEE DUE	FOR THIS AMEN	IDMENT		* ** * * * * * * * * * * * * * * * * *		

Į]	A claim fee in the	amount of \$ 18	s enclosed
[]	Charge \$	to Deposit Account No	. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

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Date: March 31, 2003